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Substitute for form 1449APTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT						Complete if Known					
						tion Number		10/554	,387		
						Date		October 25, 2005			
						med Invento	r :	SHAALTIEL Yoseph et al			
	(use as many sheets as necessary)							1652			
					Examin	er Name		RAMII	REZ Delia M.	_	
Sheet		1	of	2	Attorne	y Docket Nu	mber	30570		_	
			U.S.	PATENT	DOCUM	ENTS				_	
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(use as many sheets as necessary)

 Complete if Known

 Application Number
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 First Named Inventor
 SHAALTIEL Yoseph et al Group Art Unit

 Group Art Unit
 1652

 Examiner Name
 RAMIREZ Delia M.

Sheet		2	Of	2	Attorney Docket Number	30570				
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